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		Docket Number	BP-8935B CIP		
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	EL 825204222 US Express Mail Label Number		January 14, 2002 Date of Deposit	.s. P.	
Address to:	Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			11002 U	

## UTILITY PATENT APPLICATION TRANSMITTAL AND FEE SHEET

Transmitted herewith for filing under 37 CFR §1.53(b)(2) is a continuation-in-part of prior Application No. 09/512.512, filed February 24, 2000.

Applic	ant	(or identifier): BOULOUS ET AL.
Title:		VITAMIN FORMULATION FOR CARDIOVASCULAR HEALTH
Enclos	sed	are:
1. [ 2. ] 3.		Specification (Including Claims and Abstract) - 28 pages  Drawings - sheets  Declaration and Power of Attorney  a. Newly unexecuted (original or copy)  b. Copy from a prior application (signed or with indication that original was signed)  i. Deletion of Inventors  Signed statement attached deleting inventor(s) named in the prior application
4.		Incorporation By Reference The entire disclosure of the prior application, from which a copy of the Declaration and Power of Attorney is supplied under Box 3b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
5. 6.		Microfiche Computer Program (appendix) Nucleotide and/or Amino Acid Sequence Submission  Computer Readable Copy Paper Copy Statement Verifying Identity of Above Copies
7. 8. 9. 10. 11. 12.		Preliminary Amendment Assignment Papers (Cover Sheet & Document(s)) English Translation of Information Disclosure Statement Certified Copy of Priority Document(s) Return Receipt Postcard Other: Courtesy copy of Petition for Extension of Time on 09/512,512.

The right to elect an invention or species that is different from that elected in parent  $\boxtimes$ Application No. 09/512.512 in the event of a restriction or election of species requirement that is identical or substantially similar to that made in said parent application is hereby reserved.

Filing fee calculation:

Basic Filing Fee							\$ 740		
	Dependent Claim I	ee (\$ 280)							\$
	Language Surchar								\$ 
	For	Number Filed		Number Extra		Rate			
Extra Claims	Total Claims	14	-20	0	x	\$	18	=	\$ 
•	Independent Claims	1	-3		х	\$	84	=	\$
. TOTAL FILING FEE							\$ 740		

Please charge Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company in the amount of \$740. An additional copy of this paper is enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.16 and §1.17 which may be required in connection with this application, or credit any overpayment, to Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company.

Please address all correspondence to the address associated with Customer No. 23914, which is currently:

Stephen B. Davis Bristol-Myers Squibb Company Patent Department P.O. Box 4000 Princeton, NJ 08543-4000

Please direct all telephone calls to the undersigned at the number given below and all telefaxes to (609) 252-4526.

Respectfully submitted,

Date: January 14, 2002

Timothy J. Babcock Attorney for Applicants Reg. No. 39,097

Tel. No. (609) 252-4014